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<input type="checkbox"/>	Recordal Documents	<input type="checkbox"/>	8 & 15 Affidavit
<input type="checkbox"/>	Statement of Use	<input type="checkbox"/>	Renewal Appln.
<input type="checkbox"/>	Maintenance Fee	<input type="checkbox"/>	Cover Letter
<input checked="" type="checkbox"/>	Other (specify)		

Sup. IDS

PTO Forms SB/08 A+B

Check for \$180.00

Copies of Cited References

File No. 017 36349

Attorney JAM

Applicant DWALEY, Robert E.

Mark/Title Method for Treating E.D. and Increasing Libido in Men

U.S.S.N. 091703,753

Fee Amount \$180.00

Deposit Acct. Used Y / ☒

Due Date

Mailing Date 7-31-03



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Date In		Day Year		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Mo. Day		<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Time In		Military		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
<input type="checkbox"/> AM <input type="checkbox"/> PM		<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
Weight		Int'l Alpha Country Code		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
lbs. ozs.		Acceptance Clerk Initials		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
No Delivery		Return Receipt Fee		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
<input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		Postage		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
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		Insurance Fee		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
		Total Postage & Fees		Time <input type="checkbox"/> AM <input type="checkbox"/> PM		Employee Signature	
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07/31/03 - 3:12 PM
Date/time Form Submitted
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Beverly, Erik
Sender [01010/E5B]
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